UNITED STATES ENVIRONMENTAL PROTECTION AGENCY STANDARD ANNULAR PRESSURE TEST

Operator			SUMMIT :	PET'L	<u></u>		State Permit	Number	7298	/	
Address]	EPA Permit	Number	MI-073-2D	-0008	
]	Date of Test		MI-073-2D	3	
Well Name &	k Num	ber £	MBREK	B-4			Well Type	2D			
			,				BROOMFI				
Quarter Qu	arter	Quarter	Section	Township	Range	Tow	nship Name	Co	ounty	State	
WE NW NW			3	14N	6W	BBU	GMFIELD	IS	ABELLA	ME	
GPS file num	ber					ongitude					
			45. 63818				85. 02325				
****	1000		John 1	OKIA			V V V V V V V V V V V V V V V V V V V		, ,		
Company Representative ONN MAKECA Field Inspect							Inspector	SAM H	WILLIAMS	-	
1 ,				GAUGE (CERTIF	-		and the state of t			
Type Pressure Gauge										rements	
									bmitted? Yes		
Tien Gaage.	1007	4	11 110, 11110 0		-						
				TES	T RESU	ILTS					
Time	0	-	15	30							
Annulus	43	6	450	450							
Tubing	AC		VAC	1.0							
								NFIGURA	ATION		
5 Year TD#_14-016							Casing Size 5½				
2 Year TA			TD#				Tubing Size		7.3/0		
Rework after	r failur		The state of the s				Packer Type				
	lanun	_	TD# TD#	()					35501	4	
New Permit							Packer set (<i>y</i>			
Enforcement			TD#	 -			EI 'ID '	(1)	HI GAL.	1	
Annual Class	s I		TD#				Fluid Retur	n (gai)	yac,	45.	
Test Pressures: Max. Allowable Pressure Change: Initial test pressure c									3. 9 psi -9	20	
Test Passed	Tegt	Failed	□ • If failed t	est well must s				_	must be contacte	d within	
24 hours Corr	ective a	ction nee	ds to occur. th	e well retested.	and writte	en autho	orization receiv	ved before in	njection can reco	ттепсе.	
COMMENT		Citori nec	20 10 00001, 110						•		
COMMILIA	•			And have	And the same	15 E 25	N 12(23) (800)				
				TVT		The same of			in the second second		
				to the homest	Total Larra	cer 11 4	real Med				
L					WEST OF	à onei		1300	Kuranyai a a		
Signature of Company Representative								Date			
Signature of	Comp	any Rep	Z/ Sentative	2010	BR	AA		10/281	12013	.*:	
Signature of UIC Field Inspector EPA REGION 5								Date	•		
am & Williams								Oct 28,2	013		